



RECEIVED
CENTRAL FAX CENTER

FEB 04 2008

Fax

Attention:	Group Art Unit: 1745	From:	Travis Dodd
Fax:	571-273-8300	Fax:	818-833-2065
Phone:		Phone:	818-833-2014
Company:	U.S. Patent and Trademark Office	Company:	Quallion LLC
Pages:			Total of (12) Pages
Re:	Application Serial No.: 10/820,955 Title: BATTERY CONNECTION STRUCTURE AND METHOD Filed: April 7, 2004 Examiner: WILLS, Monique Group Art Unit: 1745 Attorney Docket No.: Q207-US1	Date:	February 4, 2008

Urgent For Review Please Comment Please Reply Please Recycle

If you have any questions or did not receive this transmission in its entirety, please call (818) 833-2000, extension 2014.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

I hereby certify that the following documents are being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 571-273-8300 on February 4, 2008:

Amendment Transmittal Letter (2 pages)
Fee Transmittal (in duplicate) (2 pages)
Amendment (8 pages)

Lisa K. Robbins
(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

NOTICE: This message is confidential, may be legally privileged, and is for the intended recipient only. Access, disclosure, copying, distribution, or reliance on any of it by anyone else is prohibited and may be a criminal offense. If it has been sent to you in error, please advise the sender of the error and immediately destroy this message.

FEB 04 2008

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/820,955
		Filing Date April 7, 2004
		First Named Inventor Berg, Paul et al.
		Group Art Unit 1745
		Examiner Name Wills, Monique
Total Number of Pages in This Submission		Attorney Docket Number Q207-US1

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers <i>(for an Application)</i>	After Allowance Communication to Group
	Drawing(s)	Appeal Communication to Board of Appeals and Interferences
	Licensing-related Papers	Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
	Petition to Convert to a Provisional Application	Proprietary Information
	Power of Attorney, Revocation Change of Correspondence Address	Status Letter
	Terminal Disclaimer	Other Enclosure(s) <i>(please identify below):</i>
	Request for Refund	
	CD, Number of CD(s) _____	
	Remarks	

Customer Number or Bar Code Label	31815 <i>(Insert Customer No. or Attach bar code label here)</i>
-----------------------------------	---

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

By:


 Travis Dodd
 Attorneys for Applicant(s)
 P.O. Box 923127
 Sylmar, CA 91382-3127

Dated: 2/4/2008

Phone: (818) 833-2003
Fax: (818) 833-2065**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail
 In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:

Typed or printed name	TRAVIS DODD	
Signature		Date

FEB 04 2008

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number 10/820,955
		Filing Date April 7, 2004
		First Named Inventor Berg, Paul et al.
		Group Art Unit 1745
		Examiner Name Wills, Monique
Total Number of Pages in This Submission		Attorney Docket Number Q207-US1

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers <i>(for an Application)</i> Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> Proprietary Information Status Letter Other Enclosure(s) <i>(please identify below):</i> <input type="text"/>
Remarks		
Customer Number or Bar Code Label 31815 <i>(Insert Customer No. or Attach bar code label here)</i>		

The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

By:


 Travis Dodd
 Attorneys for Applicant(s)
 P.O. Box 923127
 Sylmar, CA 91392-3127
Dated: 2/4/2008Phone: (818) 833-2003
Fax: (818) 833-2065**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail
 In an envelope addressed to: Commissioner of Patents and Trademarks, Washington, DC 20231 on this date:

Typed or printed name	TRAVIS DODD	
Signature	Date	

**RECEIVED
CENTRAL FAX CENTER**

FEB 04 2008

FEET TRANSMITTAL

Attorney Docket No.	Q207-US1
First Named Inventor:	BERG, Paul et al.
Application Number	10/820,955
Filing Date:	April 7, 2004
Examiner Name:	1745
Group/Art Unit:	Wills, Monique

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC 2. <input type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other - Credit Card

2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$310.00	\$155.00	\$0.00
Total Claims	24 - 26=	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	4 - 5 =	0	X \$210.00	X \$105.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$360.00	\$180.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$210.00	\$105.00	\$0.00
Reissue filing fee	\$310.00	\$155.00	\$0.00
Provisional filing fee	\$210.00	\$105.00	\$0.00
Total of above Calculations =			\$0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	2/4/2008

**RECEIVED
CENTRAL FAX CENTER**

FEB 04 2008

FEE TRANSMITTAL

Attorney Docket No.	Q207-US1
First Named Inventor:	BERG, Paul et al.
Application Number	10/820,955
Filing Date:	April 7, 2004
Examiner Name:	1745
Group/Art Unit:	Wills, Monique

TOTAL AMOUNT OF PAYMENT:	\$.00
METHOD OF PAYMENT (check One)	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to: Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC X. Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17 2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other - Credit Card

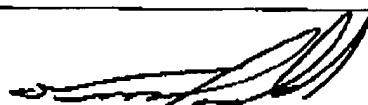
2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$310.00	\$155.00	\$0.00
Total Claims	24 - 26 =	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	4 - 5 =	0	X \$210.00	X \$105.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$360.00	\$180.00	\$0.00
Total of above Calculations =					\$0.00

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$210.00	\$105.00	\$0.00
Reissue filing fee	\$310.00	\$155.00	\$0.00
Provisional filing fee	\$210.00	\$105.00	\$0.00
Total of above Calculations =			\$0.00

3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
TOTAL:			\$

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	2/4/2008

Application No: 10/820,955 Docket No.: Q207-US1 **FEB 04 2008** Page 1IN THE UNITED STATES PATENT AND TRADEMARK OFFICEIn Re Application of:
BERG, Paul et al.

Serial No.: 10/820,955

Filed: April 7, 2004

Title: BATTERY CONNECTION
STRUCTURE AND METHOD

Examiner: WILLS, Monique

Art Unit: 1745

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**AMENDMENT AND REQUEST FOR RECONSIDERATION**

This communication is in response to the Restriction Requirement mailed on October 2, 2007. Please amend the application as follows: